12/20/04

#### **APPLICATION DATA SHEET**

### **Application Information**

Application Number::	
Filing Date::	
Application Type::	Regular
Subject Matter::	Utility
Suggested Classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Number of CD Disks::	
Number of Copies of CDs::	
Sequence Submission?::	·
Computer Readable Form (CRF)?::	No
Number of Copies of CRF::	
Title::	METHOD OF GENERATING ELECTRONIC KEYS FOR A PUBLIC-KEY CRYPTOGRAPHY METHOD AND A SECURE PORTABLE OBJECT USING SAID METHOD
Attorney Docket Number::	032326-288
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	
Total Drawing Sheets::	1
Small Entity?::	No

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## 10/518639 DT01 Rec'd PCT/PTC 2 0 DEC 2004

12/20/04

Latin Name:: Variety Denomination Name:: Petition Included?:: No Petition Type:: Licensed US Govt. Agency:: Contract or Grant Numbers:: Secrecy Order in Parent Appl.?:: No **Applicant Information** Applicant Authority Type:: Inventor **Primary Citizenship Country::** France Status:: **Full Capacity** Given Name:: Nathalie Middle Name:: Family Name:: **FEYT** Name Suffix:: **Cuges Les Pins** City of Residence:: State or Province of Residence:: France Country of Residence:: 8, chemin de Raphele, 7 lotissement l'Oliveraie Street of Mailing Address:: City of Mailing Address:: Cuges les Pins State or Province of Mailing Address:: Country of Mailing Address:: France

F-13780

Page # 2

Postal or Zip Code of Mailing

# 10/518639 DT01 Rec'd PCT/PT? 2 0 DEC 2004

Address::

Applicant Authority Type::

Inventor

**Primary Citizenship Country::** 

France

Status::

**Full Capacity** 

Given Name::

Marc

Middle Name::

Family Name::

**JOYE** 

Name Suffix::

City of Residence::

Saint Zacharie

State or Province of Residence::

Country of Residence::

France

Street of Mailing Address::

19, rue Voltaire

City of Mailing Address::

Saint Zacharie

State or Province of Mailing

Address::

Country of Mailing Address::

France

Postal or Zip Code of Mailing

Address::

F-83640

### **Correspondence Information**

Correspondence Customer Number:: 21839

Phone Number::

(703) 836-6620

Fax Number:

(703) 836-2021

#### Representative Information

Representative Customer Number:: 21839

**Domestic Priority Information** 

Application::

**Continuity Type::** 

**Parent Application:: Parent Filing** 

Date::

This Application

National Stage of

PCT/FR2003/001871 06/18/03

**Foreign Priority Information** 

Country::

**Application Number::** 

Filing Date::

Priority

Claimed::

France

02/07688

06/19/02

Yes

**Assignee Information** 

Assignee Name::

**GEMPLUS** 

Street of Mailing Address::

Parc d'Activites de Gemenos, Avenue du Pic-de-

Bertagne

City of Mailing Address::

Gemenos

State or Province of Mailing

Address::

Country of Mailing Address::

France

Postal or Zip Code of Mailing

Address::

F-13420

12/20/04